

UNITED STATES DISTRICT COURT

for the

District of Nebraska

Division

Case No.

8:19cv13

(to be filled in by the Clerk's Office)

Ryan Elliot Fehderau

Plaintiff(s)

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

-v-

Jury Trial: (check one) ☒ Yes ☒ No\$10,000,000~~First~~ United States of America

Defendant, Third-party plaintiff(s)

(Write the full name of each defendant/third-party plaintiff. If the names of all the defendants/third-party plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

-v-

First National of Nebraska, Inc.~~Third party~~ defendant(s)

(Write the full name of each third-party defendant. If the names of all the third-party defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

FILED
U.S. DISTRICT COURT
DISTRICT OF NEBRASKA
2019 JAN 11 PM 3:06
OFFICE OF THE CLERK

~~THIRD PARTY COMPLAINT~~

I. The Parties to This Complaint

A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address (if known)

Ryan Elliot Fehderau16415 Saratoga StOmaha DouglasNebraska 68116402 709 2046rehderau@gmail.com

B. The Defendant(s)/~~Third-Party Plaintiff(s)~~

Provide the information below for each defendant/third-party plaintiff named in the complaint. Attach additional pages if needed.

Name	United States of America Department of
Street Address	Labor, Wage and Hour Division
City and County	222 S 15th Street, Suite 501A
State and Zip Code	Omaha, Nebraska Douglas
Telephone Number	Nebraska 68116
E-mail Address	402 221 4695

C. ~~The Third-Party Defendant(s)~~

Provide the information below for each third-party defendant named in the complaint, whether the third-party defendant is an individual, a government agency, an organization, or a corporation. For an individual third-party defendant, include the person's job or title (*if known*). Attach additional pages if needed.

Third-Party Defendant No. 1

Name	First National of Nebraska, Inc.
Job or Title (<i>if known</i>)	
Street Address	2017 15th St 1601 Dodge St
City and County	Omaha Douglas
State and Zip Code	Nebraska 68102
Telephone Number	1-855-470-3777
E-mail Address (<i>if known</i>)	

Third-Party Defendant No. 2

Name	
Job or Title (<i>if known</i>)	
Street Address	
City and County	
State and Zip Code	
Telephone Number	
E-mail Address (<i>if known</i>)	

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Third-Party Defendant No. 3

Name

Job or Title *(if known)*

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address *(if known)*

Third-Party Defendant No. 4

Name

Job or Title *(if known)*

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address *(if known)*

II. Initial Complaint

- A. Identify the initial complaint filed against you and the date it was filed. Describe the events that gave rise to the plaintiff's complaint, the nature of the claims asserted, and the relief sought. Attach the complaint as an exhibit.

Family Medical Leave Act. Termination.

- B. State whether you have filed an answer to the complaint and, if so, briefly summarize what admissions or denials that answer asserted. Attach the answer as an exhibit.

III. ~~Third-Party Complaint~~

- A. Describe the nature of the relationship between you and the third-party defendant. Attach any contracts or documents showing the nature of the relationship.

~~Investigative~~
~~Investigative~~
 Family Medical Leave Act

- B. Explain why, if the plaintiff received any judgment against you, you will be entitled to judgment against the third-party defendant for contribution to or indemnification for the amount of damages and costs awarded to the plaintiff. Include the percentage of the plaintiff's recovery that the third-party defendant will be required to contribute. Describe the facts, or relevant provisions of state law, that demonstrate you are entitled to collect from the third-party defendant.

Law

IV. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: 1/11/2019

Signature of ~~Defendant/Third-Party~~ Plaintiff

Printed Name of ~~Defendant/Third-Party~~ Plaintiff

Ryan Elliot Fehderau
Ryan Elliot Fehderau

B. For Attorneys

Date of signing: _____

Signature of Attorney _____

Printed Name of Attorney _____

Bar Number _____

Pro Se 11 (Rev. 12/16) Third-Party Complaint

Name of Law Firm

Street Address

State and Zip Code

Telephone Number

E-mail Address